

**BOARD OF PSYCHOLOGY**

1422 HOWE AVENUE, SUITE 22
SACRAMENTO, CA 95825-3200
(916) 263-2699
www.psychboard.ca.gov



**CALIFORNIA BOARD OF PSYCHOLOGY
SUPERVISION AGREEMENT FOR SUPERVISED PROFESSIONAL EXPERIENCE IN
NON-MENTAL HEALTH SERVICES
(PURSUANT TO SECTION 1387.3(a)&(b) OF THE CALIFORNIA CODE OF REGULATIONS)**

This agreement is to be completed by the undersigned primary supervisor and supervisee prior to the commencement of the supervised professional experience (SPE). The primary supervisor agrees to maintain this agreement until the supervisee completes the SPE and requests the primary supervisor to rate and verify the experience.

PRIMARY SUPERVISOR: _____
(Print or Type: First Name, Middle Initial and Last Name)

DELEGATED SUPERVISOR(S): _____
(Print or Type: First Name, Middle Initial and Last Name)

(Print or Type: First Name, Middle Initial and Last Name)

(Print or Type: First Name, Middle Initial and Last Name)

SUPERVISEE: _____
(Print or Type: First Name, Middle Initial and Last Name)

INTRODUCTION

The above supervisee will be delivering non-mental health services described below to the consumer public under one of the following categories under the California Business and Professions Code.
(check appropriate category):

- _____ 2909(d) - Registered Psychologist
- _____ 2910 - employee of an "exempt" setting
- _____ 2911 - intern in a formal predoctoral internship placement
- _____ 2913 - registered psychological assistant
- _____ Department of Mental Health Waiver

What is the start and anticipated completion dates of the above checked category:

Start Date: _____ Anticipated Completion Date: _____

What are the specific duties the supervisee will perform as they relate to the practice of psychology at the doctorate level? (Please use a separate page)

The supervisee will perform these services in the following location(s). Please include the address:

What professional title is the supervisee being assigned in this setting?

IN ADDITION TO THE ABOVE PROVISIONS, THE FOLLOWING PROVISIONS OF THIS AGREEMENT ARE TO BE COMPLETED BY BOTH THE PRIMARY SUPERVISOR AND THE SUPERVISEE AND REVIEWED BY ALL SUPERVISORS:

In any supervised professional experience, the primary supervisor assumes professional and ethical responsibility for the psychological functions performed by the supervisee. The supervisor is also responsible for ensuring that the supervised professional experience meets all requirements set forth in section 1387 of the Code of Regulations and, in the case of registered psychological assistants, in section 1391 of the Code of Regulations.

The supervisor(s) and supervisee agree as follows: (Please check yes or no as it is reviewed).

SUPERVISION REQUIREMENTS:

(California Code of Regulations Section 1387)

Yes No

1. ☐ ☐ As noted in 1387.3, a proposed supervisory agreement for those preparing for practice in non-mental health services will be developed and will describe the qualifications and responsibilities of the supervisor (and co-supervisor, if appropriate) in an agreement for supervision that is submitted by the supervisee to the board for approval. The agreement will be judged on the basis of the appropriateness of the agreement for preparation of the supervisee to practice effectively within the specific non-mental health/clinical setting.
2. ☐ ☐ The supervisee will be provided with at least 1 hour of face-to-face, direct, individual supervision by the primary supervisor each week. The individual supervision agreement will address how the supervision will be provided.
3. ☐ ☐ The supervisee will be provided with supervision for 10% of the total time worked.
4. ☐ ☐ The supervisee shall have no proprietary interest in the business of the primary or delegated supervisor(s) and shall not serve in any capacity which would hold influence over the primary or delegated supervisor(s) judgement in providing supervision.
5. ☐ ☐ A maximum of forty-four (44) hours per week, including the required 10% supervision will be credited toward meeting the supervised professional experience requirement.
6. ☐ ☐ Neither the primary supervisor nor any delegated supervisors will receive payment, monetary or otherwise, from the supervisee for the purpose of providing supervision.
7. ☐ ☐ The supervisee will not function under any other license or in any other professional capacity with the same client or patient and in the same setting during the supervised experience.
8. ☐ ☐ The supervisor(s) will maintain a clear and accurate record of supervisee's supervision. This record may be in the form of the SPE log required to be maintained by the supervisee pursuant to section 1387.5 of the Code of Regulations.
9. ☐ ☐ The individual agreement will address how the quality of work done by the supervisee working full time in a non-mental health or clinical role will be monitored for quality and assures protection of the client organizational.

QUALIFICATIONS AND RESPONSIBILITIES OF PRIMARY SUPERVISORS:

(California Code of Regulations Section 1387.1)

THE PRIMARY SUPERVISOR:

Yes No

1. ☐ ☐ Must be a licensed psychologist, except board certified psychiatrists may be primary supervisors of their own registered psychological assistants.
This does not apply to an agreement pursuant to 1387(b).
2. ☐ ☐ Shall possess and maintain a valid, active license free of any formal disciplinary action, and will notify the supervisee of any disciplinary action that affects his or her ability or qualifications to supervise.

- | | <u>Yes</u> | <u>No</u> | |
|-----|--------------------------|--------------------------|--|
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Shall be <u>employed</u> by the same work setting in which the supervisee will be working for at least half the time that the supervisee will be working, except for supervisors of psychological assistants who shall be physically on site at least 50% of the time that the psychological assistant is working each week. |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Shall be available to the supervisee 100% of the time the supervisee is working. This availability may be in person or through telephone, beeper or other appropriate technologies. For registered psychological assistants, the supervisor must be physically on site 50% of the time the registrant is providing limited psychological services. |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | Shall complete a minimum of six hours of supervision coursework every two years as described in section 1387.1(c). |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | Shall ensure that all parties will work together to ensure that the supervisee will be engaged in doctoral level. |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | Shall maintain ongoing communication between all parties regarding supervisory needs and experiences |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | Shall ensure that both they and the supervisee are in compliance at all times with the provisions of the Psychology Licensing Law or the Medical Practice Act, whichever might apply, and the regulations adopted pursuant to these laws. |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | Shall ensure that all SPE is conducted in compliance with the Ethical Principles and Code of Conduct of the American Psychological Association. |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | Shall monitor the welfare of the supervisee's clients. |
| 11. | <input type="checkbox"/> | <input type="checkbox"/> | Shall inform each client of the supervisee (typically the hiring executive such as the CEO or head of HR) prior to the supervisee performing services within a non-mental health/clinical setting that the supervisee is unlicensed and is functioning under the direction and supervision of the primary supervisor. |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | Shall monitor the performance and professional development of the supervisee. |
| 13. | <input type="checkbox"/> | <input type="checkbox"/> | Shall ensure that he or she has the education, training, and experience in the area(s) of psychological practice supervised. |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | Shall have no familial, intimate or other relationship with the supervisee which would compromise the supervisor's effectiveness, and/or would violate the Ethical Principles and Code of Conduct of the American Psychological Association. |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | Shall not supervise a supervisee who is now or ever has been a psychotherapy client of the supervisor. |
| 16. | <input type="checkbox"/> | <input type="checkbox"/> | Shall not exploit or engage in sexual relationships or any other sexual contact with the supervisee. |
| 17. | <input type="checkbox"/> | <input type="checkbox"/> | Shall provide a copy of the pamphlet "Professional Therapy Never Includes Sex" to the supervisee. |
| 18. | <input type="checkbox"/> | <input type="checkbox"/> | Shall monitor the supervision performance of all delegated supervisors. |

QUALIFICATIONS AND RESPONSIBILITIES OF DELEGATED SUPERVISORS:
(California Code of Regulations Section 1387.2)

THE DELEGATED SUPERVISOR(S):

- | | <u>Yes</u> | <u>No</u> | |
|----|--------------------------|--------------------------|--|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Must be a licensed psychologist or those other licensed mental health professionals listed in section 1387(c). |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Shall possess and maintain a valid, active license free of any formal disciplinary action, and will notify the supervisee and primary supervisor of any disciplinary action that affects their ability or qualifications to supervise. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Shall complete a minimum of six hours of formal training in supervision. |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Shall ensure that both they and the supervisee are in compliance at all times with the provisions of the Psychology Licensing Law, the licensing laws of the Board of Behavioral Sciences, or the Medical Practice Act, whichever might apply, and the regulations adopted pursuant to these laws. |

Yes No

5. ☐ ☐ Shall ensure that all SPE conducted under the supervision delegated to them is conducted in compliance with the Ethical Principles and Code of Conduct of the American Psychological Association.
6. ☐ ☐ Shall monitor the welfare of the supervisee's clients while under their delegated supervision.
7. ☐ ☐ Shall monitor the performance and professional development of the supervisee and for reporting this performance and development to the primary supervisor.
8. ☐ ☐ Shall ensure that they have the education, training, and experience in the area(s) of psychological practice to be supervised.
9. ☐ ☐ Shall have no familial, intimate or other relationship with the supervisee which would compromise the supervisor's effectiveness, and/or would violate the Ethical Principles and Code of Conduct of the American Psychological Association.
10. ☐ ☐ Shall not supervise a supervisee who is now or ever has been a psychotherapy client of the supervisor.
11. ☐ ☐ Shall not exploit or engage in sexual relationships or any other sexual contact with supervisee.

PRIMARY SUPERVISOR'S SIGNATURE

I understand and accept this agreement, including, but not limited to my duties as a supervisor, and will ensure to the best of my abilities, that the supervisee and all delegated supervisors will comply with the terms and conditions of this agreement. All the foregoing is true and correct.

Name (Print or Type) _____ License #: _____

Signature _____

City and State _____ Date _____

DELEGATED SUPERVISOR(S) SIGNATURE(S)

I understand and accept this agreement, including, but not limited to, my duties and responsibilities as a delegated supervisor and will ensure to the best of my abilities that the supervisee and I will comply with the terms and conditions of this agreement. All the foregoing is true and correct.

• Name (Print or Type) _____

Signature _____

City and State _____ Date _____

• Name (Print or Type) _____

Signature _____

City and State _____ Date _____

SUPERVISEE'S SIGNATURE

I understand and will comply with the terms and conditions of this agreement. I will cooperate with my supervisor(s) to ensure that conditions of the supervision are fulfilled and will provide my supervisor(s) with all information necessary to supervise me on matters involving professional, ethical or legal concerns. All of the foregoing is true and correct.

Name (Print or Type) _____

Signature _____

City and State _____ Date _____

This section only applies to alternative SPE pursuant to section 1387.3(b) of the California Code of Regulations and must be submitted and approved by the Board prior to the commencement of services.

Section 1387.3(b) reads "For training approved pursuant to this section, the supervisee may be supervised by an appropriate unlicensed individual only if the supervisee has obtained an agreement within the provisions of this section with a licensee who meets the qualifications set forth in section 1387.1, and who is educated and experienced in the supervisee's area of education and training, to serve as co-supervisor. The qualifications and responsibilities of both the supervisor and co-supervisor shall be stated in the letter of agreement for supervision submitted by the supervisee to the board of approval."

QUALIFICATIONS AND RESPONSIBILITIES OF THE CO-SUPERVISOR:
(California Code of Regulations Section 1387.3(b))

Yes No

1. ☐ ☐ As noted in 1387.3, a proposed supervisory agreement for those preparing for practice in non-mental health services will be developed and will describe the qualifications and responsibilities of the supervisor (and co-supervisor, if appropriate) in an agreement for supervision that is submitted by the supervisee to the board for approval. The agreement will be judged on the basis of the appropriateness of the agreement for preparation of the supervisee to practice effectively within the specific non-mental health/clinical setting.
2. ☐ ☐ Must be a licensed psychologist or those other licensed mental health professionals listed in section 1387(c).
3. ☐ ☐ Shall possess and maintain a valid, active license free of any formal disciplinary action, and will notify the supervisee and primary supervisor of any disciplinary action that affects their ability or qualifications to supervise.
4. ☐ ☐ Shall complete a minimum of six hours of supervision coursework every two years as described in section 1387.1(c).
5. ☐ ☐ Shall monitor the performance and professional development of the supervisee and for reporting this performance and development to the primary supervisor.
6. ☐ ☐ Shall not supervise a supervisee who is now or ever has been a psychotherapy client of the supervisor.
7. ☐ ☐ Shall not exploit or engage in sexual relationships or any other sexual contact with supervisee.
8. ☐ ☐ Shall have no familial, intimate or other relationship with the supervisee which would compromise the supervisor's effectiveness, and/or would violate the Ethical Principles and Code of Conduct of the American Psychological Association.
9. ☐ ☐ Shall ensure that all parties will work together to ensure that the supervisee will be engaged in doctoral level.
10. ☐ ☐ Shall maintain ongoing communication between all parties regarding supervisorial needs and experiences.

CO-SUPERVISOR'S SIGNATURE

I understand and accept this agreement, including, but not limited to my duties as a co-supervisor, and will ensure to the best of my abilities, that the supervisee and primary supervisor will comply with the terms and conditions of this agreement. All the foregoing is true and correct.

Name (Print or Type) _____

License Number _____ Expiration Date _____

Signature _____

City and State _____ Date _____

The Board of Psychology has reviewed the agreement for alternative supervised professional experience prior to the commencement of non-mental health services and has made the following decision:

Approved _____ Date _____

Denied _____ Reason for denial _____ Date _____